Case 2:19-bk-52842 Doc 11-1 Filed 06/28/19 Entered 06/28/19 20:33:45 Desc Exhibit Page 1 of 8

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Debtor 1 Mary M Crooks Debtor 2 (spouse, if fareg)	Fill	in this information to identify you	ır case:							
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number (If known) Official Form 106! Schedule I: Your Income 1215 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your founds at tach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart II Describe Employment 1. Fill in your employment Information. If you have more than one job, attach a separate page with information about your many include student information. If you have more than one job, attach a separate page with information about additional employers. Occupation Retired Include part-time, seasonal, or self-employed many include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Employer's name Employer's address How long employed there? Part 3: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write 50 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A	Deb	otor 1 Mary M C	rooks							
Case number (If vown) Check if this is:						_				
Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing yeith you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Meeting Debtor 1 Debtor 1 Debtor 2 or non-filing spouse Employer's name Employer's name Employer's name Employer's name Employer's address or the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2 s 0.00 s N/A	Unit	ted States Bankruptcy Court for	the: SOUTHERN DISTRIC	CT OF OHIO		_				
Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse, if more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:				-			An amended A suppleme	nt showing		chapter
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Information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or inon-filing spouse. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A	supp spot attac	plying correct information. If y use. If you are separated and ch a separate sheet to this for	ou are married and not fili your spouse is not filing w m. On the top of any additi	ng jointly, and your sp ith you, do not include	ouse i	s living with nation abou	you, inclu t your spo	de informa use. If mor	tion about e space is r	your needed,
attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A	1.									
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Self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Fart 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A		employers.	Occupation	Retired						
How long employed there? Part 2: Give Details About Monthly Income			Employer's name							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$			ent Employer's address							
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The space of the s	Esti i spou	mate monthly income as of thuse unless you are separated.	e date you file this form. If	you have nothing to rep	ort for a	any line, writ	e \$0 in the	space. Inclu	ıde your non	-filing
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A				ombine the information f	for all e	mployers for	that persor	n on the line	s below. If y	ou need
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ N/A						For De	btor 1			
3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	2.	List monthly gross wages, s deductions). If not paid month	salary, and commissions (baly, calculate what the month	efore all payroll ly wage would be.	2.	\$	0.00	\$	N/A	
	3.	Estimate and list monthly or	vertime pay.		3.	+\$	0.00	+\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$ 0.00 \$ N/A	4.	Calculate gross income. Ad	d line 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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	Debtor	1 Mary M Crooks			Ca	se number (f knowr)			
	C.				F	or Debtor	1		For Deb non-filin		
	C	opy line 4 here		4.	\$		0.00		\$		V/A
;	5. Li	ist all payroll deductions:						_			
	5a	a. Tax, Medicare, and Social Security deductions		E -					_		
	5b	Mandatory contributions for retirement plans		5a 5b			0.00	_	\$		V/A
	50	C. Voluntary contributions for retirement plans		5c			0.00	_	<u> </u>		<u>VA</u> .
	5d	Required repayments of retirement fund loans		5d			0.00	_	<u>.</u>		<u>I/A</u> _
	5e			5e			0.00	_	` ———		<u>I/A</u>
	5f.			5f.	\$		0.00	_ '	<u></u>		<u>I/A</u> I/A
	5g 5h			5g	. \$		0.00	_			I/A I/A
,				5h	.+ \$ _		0.00	_ `	;		I/A
6		dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.		6.	\$_		0.00	- \$			/A
7		alculate total monthly take-home pay. Subtract line 6 from line 4.		7.	\$		0.00	- \$;		/ A
	. Lis 8a.	profession, or farm						-		<u></u> .``	<u></u>
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		•							
	8b.	Interest and dividends		8a. 8b.	\$_		0.00	-			<u>/A</u>
	8c.	regularly receive		OD.	\$ _		0.00	_ \$		N	<u>/A_</u>
		settlement, and property settlement.		8c.	\$		0 00	•			
	8d.	and the state of the classical		8d.	\$_		0.00 0.00	. \$ \$			<u>'A</u>
	8e. 8f.			8e.	\$_	2,16		. \$ \$		N/	A
		Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assist that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies. Specify:	al	8f.	\$			· ·		,	_
	8g.	Pension or retirement income		8g.	*-	1,31	0.00	\$ \$		N/	
	8h.	Other monthly income. Specify:		-g. 8h.+			0.00			N/	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.		_	· -			· 🕎		N/.	<u>A</u>
		7 kdd iilies da 1001 du 1004 du 1004 8g +8n.	(9.	\$	3,482	2.85	\$_		N	/A
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		3,482.85	+ \$			7_[_	
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		•		0,402.03	· Ψ-		N/A	= \$	3,482.85
11	othe	te all other regular contributions to the expenses that you list in Sche ude contributions from an unmarried partner, members of your household, or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are cify:	your de	pend	dents, le to p	your room	mates	s, and	Schedul	e J. +\$	0.00
12.	Add Write appli	the amount in the last column of line 10 to the amount in line 11. The ethat amount on the Summary of Schedules and Statistical Summary of Cies	e result i <i>ertain Li</i>	is th	e com ities a	bined mon nd Related	thly in Data	come		\$	3,482.85
										Comb	
13.	=	No.								month	ly income
		Yes. Explain: Social security income is net after medicare of anticipated changes.	deducti	ion.	Pen	sion is ne	et aft	er fe	deral ta	xes. N	lo
		-									

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	I in this information to identify y	our case:						
	btor 1 Mary M Cro				C	Check	if this is:	
							n amended filing	
	btor 2] A	supplement show	ing postpetition chapt
(Sp	oouse, if filing)					13	B expenses as of	the following date:
Jni	ited States Bankruptcy Court for the	e: SOUT	HERN DISTRICT OF OHIO)		M	M / DD / YYYY	
Cas	se number							
lf k	known)							
O	fficial Form 106J							
_	chedule J: Your	Expe	nses					1
nu	as complete and accurate as ormation. If more space is no mber (if known). Answer eve t 1: Describe Your House	ry question	ich anomer sneet to this	e filing together, bot form. On the top of a	h are e ny add	quall	y responsible fo al pages, write y	
1.	Is this a joint case?	enoia						
	No. Go to line 2.							
	☐ Yes. Does Debtor 2 live	in a separ	ate household?					
	☐ No ☐ Yes. Debtor 2 mus	st file Offic	al Form 106J-2, Expenses	for Separate Househo	old of D	ehtor	2	
	Do you have dependents?			voi esparato riodolito	70 OI D	CDIO	۷.	
	Do not list Debtor 1 and Debtor 2.	□ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to		Dependent's age	Does dependent live with you?
	Do not state the						-9-	□ No
	dependents names.							☐ Yes
						_		□ No
								☐ Yes
								□ No
								□ Yes
								L res
						_		□ Ma
						_		□ No
•	Do your expenses include expenses of people other ti	nan	No				· · · · · · · · · · · · · · · · · · ·	□ No □ Yes
	Do your expenses include expenses of people other to yourself and your dependent	nan	No Yes					=
art	expenses of people other to yourself and your dependent 2: Estimate Your Ongoin	nan nts? □ ng Monthi	Yes V Expenses					Yes
ari sti xpo	expenses of people other the yourself and your dependent	nts?	Yes y Expenses	ou are using this forn	n as a s check	suppl the b	ement in a Chap ox at the top of t	Yes
ant sti kpe pp	expenses of people other to yourself and your depender 2: Estimate Your Ongoin mate your expenses as of yourself after the blicable date.	nan nts?	Yes y Expenses ptcy filing date unless your is filed. If this is a supplement assistance if	vou know	n as a s check	suppl the b	ement in a Chap ox at the top of t	Yes
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enti sti oppi clu	expenses of people other the yourself and your dependent 2: Estimate Your Ongoin mate your expenses as of your expenses as of a date after the blicable date. Sudde expenses paid for with no yalue of such assistance and icial Form 1061.) The rental or home owners?	nan nts? ng Monthly pur bankru pankruptcy non-cash q i have inc	Yes y Expenses ptcy filing date unless you is filed. If this is a suppl government assistance if luded it on Schedule I: You ses for your residence in	you know our Income	спеск	tne b	ox at the top of	Yes ter 13 case to report the form and fill in th
sti (po clu e v	expenses of people other the yourself and your dependent and your dependent and your expenses as of your expenses as of your expenses as of a date after the blicable date. In the people of such assistance and icial Form 106l.) The rental or home owners and payments and any rent for the your expenses of payments and any rent for the your expenses.	nan nts? ng Monthly pur bankru pankruptcy non-cash q i have inc	Yes y Expenses ptcy filing date unless you is filed. If this is a suppl government assistance if luded it on Schedule I: You ses for your residence in	you know our Income	спеск 4.	s _	ox at the top of	Yes ter 13 case to report the form and fill in the
arti sti spopi clu e v	expenses of people other the yourself and your dependence. Estimate Your Ongoing mate your expenses as of your expenses as of a date after the bilicable date. In the expenses paid for with movalue of such assistance and icial Form 106I.) The rental or home owners payments and any rent for the lift not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's	nan nts? ng Monthly bur bankru bankruptcy non-cash g i have inc nip expense ground or	Yes y Expenses ptcy filing date unless your is filed. If this is a supply government assistance if luded it on Schedule I: Your residence. In lot.	you know our Income	4.	\$	ox at the top of	Yes ter 13 case to report the form and fill in the
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arti sti xpo ppi icli icli icli poffi	expenses of people other the yourself and your dependence. Estimate Your Ongoing mate your expenses as of your expenses as of your expenses as of your expenses as of a date after the bilicable date. Unde expenses paid for with no your expenses paid for with no your expenses paid for with no your expenses and any rent for the payments and any rent for the lift not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's	nan nts? Ing Monthly bur bankru bankruptcy non-cash g id have inc inip expense ground or ground or or renter's bair, and up on or cond	Yes y Expenses py Expenses py Expenses py Expenses py Expenses py Is filled. If this is a suppl government assistance if luded it on Schedule I: You sees for your residence. In lot. s insurance okeep expenses ominium dues	you know our Income	4.	\$ \$ \$	ox at the top of	Yes ter 13 case to report the form and fill in the

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Debtor 1	Mary M	Crooks	Case nui	mber (if known)	
6. Utili	ities:				
6a.	Electricity	/, heat, natural gas	6a	ı. \$	205.00
6b.		ewer, garbage collection		o. \$	65.00
6c.		e, cell phone, Internet, satellite, and cable services		;. \$	
6d.	Other, S				230.00
		sekeeping supplies		. \$	0.00
		children's education costs		. \$	575.00
			8	. \$	0.00
. Clot	ınıng, ıaun	dry, and dry cleaning	9	. \$	95.00
		products and services	10	. \$	95.00
		ental expenses	11	. \$	170.00
2. Tran	nsportation	. Include gas, maintenance, bus or train fare.			11 0.00
Do n	not include (car payments.	12	. \$	250.00
13. Ente	ertainment	clubs, recreation, newspapers, magazines, and books	13	. \$	100.00
4. Chai	ritable con	tributions and religious donations		. \$	
5. Insu			17	. Ψ	15.00
		nsurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insur	ance	150	œ	
	Health in		15a.		0.00
	Vehicle in		15b.	· ———	260.00
			15c	. \$	55.00
		urance. Specify:	15d.	. \$	0.00
6. Taxe	es. Do not i	nclude taxes deducted from your pay or included in lines 4 or 20).		
Spec	cify:	<u> </u>	16.	. \$	0.00
7. Insta	allment or	ease payments:			0.00
17a.	Car paym	ents for Vehicle 1	17a.	\$	0.00
17b.	Car paym	ents for Vehicle 2	17b.	· ———	
	Other. Sp	ecifir:			0.00
	Other, Sp		17c.	·	0.00
			17d.	. \$	0.00
io. Tour	payments	of alimony, maintenance, and support that you did not rep	ort as	•	2.22
O Otho	ucteu mom	your pay on line 5, Schedule I, Your Income (Official Form	106I). 18.		0.00
		s you make to support others who do not live with you.		\$	0.00
Spec			19.		
O. Otne	er real prop	erty expenses not included in lines 4 or 5 of this form or or	Schedule I: Yo	our Income.	
		s on other property	20a.	\$	0.00
	Real esta		20b.	\$	0.00
20c.	Property,	homeowner's, or renter's insurance	20c.	\$	50.00
20d.	Maintena	nce, repair, and upkeep expenses	20d.		
20e.	Homeowr	er's association or condominium dues	20e.	· —	0.00
	r: Specify:	Service Control of the Control of th		·	0.00
•	or openny.		21.	+\$	0.00
2. Calci	ulate your	monthly expenses			
22a. /	Add lines 4	through 21.			
		2 (monthly expenses for Debtor 2), if any, from Official Form 10	0.1.0	\$	3,425.40
	oopy mic z	2 (monthly expenses for Debtor 2), if any, from Official Form 10	6J-2	\$	
22c. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	3,425.40
3 Cales	ulata vaur	monthly net income.			3,.20.10
3. Calci	Conviling	10 Grand and Gra			,
∠3a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.		3,482.85
23b.	Copy you	monthly expenses from line 22c above.	23b.	-\$	3,425.40
_					-,720,70
23c.	Subtract y	our monthly expenses from your monthly income.			
	The result	is your monthly net income.	23c.	\$	57.45
roi ex	cation to the	an increase or decrease in your expenses within the year at u expect to finish paying for your car loan within the year or do you expeterms of your mortgage?	ter you file this ct your mortgage	s form? payment to increa	ase or decrease because of a
□ Ye		Explain here: Debtors pays a monthly premium for su Debtor's vehicle is over 12 years old and in fair con in the next 12-18 months. No other anticipated chan	dition: she ar	ledicare insu nticipated the	rance as listed on 15b. e need for a vehicle paym

201410150136174 Terry J. Brown Franklin County Recorder

(Space Above This Line for Recording Data) -MORTGAGE

THIS MORTGAGE ("Mortgage") is given on September 18, 2014 The mortgagor is

MARY MICHELLE CROOKS, UNMARRIED

When Recorded Return To: Accurate Title Group 2925 Country Drive St. Paul, MN 55117

Whose address 1576 GRAYLING CT, COLUMBUS, OH, 43235-0000.

("Borrower"). This Mortgage is given to FIFTH THIRD BANK (CENTRAL OHIO) which is organized and existing under the laws of and whose address is OHIO__

5050 KINGSLEY DR CINCINNATI, OH 45263 ("Lender"), Borrower owes Lender the principal sum of Fifty Thousand AND 00/100 Dollars (U.S. 50,000.00) (herein, the "Indebtedness"). This indebtedness is evidenced by Borrower's note, credit agreement or other evidence of indebtedness, dated the same date as this Mortgage, with the full indebtedness, if not paid earlier, due and payable on 09/25/44 (herein, the "Loan Documents"). TO SECURE to Lender (a) the repayment of the Indebtedness evidenced by the Loan Documents and any extensions or renewals thereof, with interest thereon, the payment of all other funds, with interest thereon, advanced in accordance herewith to protect the security of this Mortgage, and the performance of the covenants and agreements of Borrower herein contained, or contained in the Loan Documents or any document executed in connection therewith, and (b) the repayment of any and all other loans, advances or indebtedness of Borrower owed to Lender and all affiliates of Lender, of any nature whatsoever (collectively the "Obligations") and (c) the repayment of any future advances, with interest thereon, made to Borrower by Lender pursuant to Item 21 hereof (herein "Future Advances"), Borrower does hereby mortgage, grant, warrant and convey to Lender, with mortgage covenants, the following described property located in the County of FRANKLIN State of Ohio, to wit (herein, the "Real Estate"):

SEE ATTACHED EXHIBIT "A"

which has the address of 1576 GRAYLING CT COLUMBUS, OH 43235-0000 ("Property Address");

FIFTH THIRD BANK

LOAN ORIGINATOR'S NAME: LAURA BACHMEYER

TOGETHER WITH all the improvements now or hereafter erected on the Real Estate, and all easements, rights, appurtenances, rents, royalties, mineral, oil and gas rights and profits, and all fixtures now or hereafter permanently attached to, the Real Estate, and all right, title and interest of Borrower in and to the land lying in the streets and roads, in front of and adjoining the Real Estate, all of which, including replacements and additions thereto, shall be deemed to be and remain a part of the Real Estate covered by this Mortgage; and all of the foregoing, together with said Real Estate (or the leasehold estate if this Mortgage is on a leasehold) are herein referred to as the "Property".

BORROWER COVENANTS that Borrower is lawfully seized of the estate hereby conveyed and has the right to mortgage, grant, warrant, and convey the Property, that the Property is unencumbered, except for encumbrances of record, and that Borrower will warrant and defend the title of the Property against all claims and demands.

MASTER MORTGAGE FORM:

All terms of that certain master mortgage form ("Master Mortgage Form") recorded 06/14/2007
pursuant to Ohio Revised Code section 5302.15 in the office of the FRANKLIN County Recorder,
Instrume:

... Book N\A , page N\A by Fifth Third Bank, by David
A. Jacksc...

COPY: A copy of the Master Mortgage Form has been furnished to the mortgagor prior to the execution of this Security Instrument and mortgagor hereby acknowledges receipt of the same by signing at the end of this instrument.

BY SIGNING BELOW, Borrower accepts and agrees to the terms and convenants contained in this Mortgage, (including but not limited to the Master Mortgage Form) and in any rider(s) executed by Borrower and recorded with it. If for any reason the Master Mortgage Form shall not be deemed a part of this Mortgage, this 3 (three) page instrument, plus any rider(s) and attached legal description shall stand by itself as a mortgage document, binding on Borrower(s) for the benefit of Fifth/Third Bank, its-successors and assigns.

	4.	Mary Michelle CROOKS	Poroks	(Seal)
				(Seal)
STATE OF OKIO		Frenklin	COUNTY	

On this 18th DAY OF September, 2014, before me, a Notary Public in and for said County and State, personally appeared MARY MICHELLE CROOKS, UNMARRIED

the individual(s) who executed the foregoing instrument and acknowledged that HE/SHE did examine and read the same and did sign the foregoing instrument, and that the same is HIS/HER free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

My Commission Expires:

BRENT M. CHANEY
Notary Public, State of Ohio
My Commission Expires
July 21, 2018

Notary Public

Strat N Change Typed, Printed or Stamped Name

This instrument was prepared by: FIFTH THIRD BANK (CENTRAL OHIO)
5050 KINGSLEY DR CINCINNATI, OH 45263

(page 3 of 3)

2HI2 (06/09)

EXHIBIT A

THE FOLLOWING REAL PROPERTY SITUATED IN THE COUNTY OF FRANKLIN, IN THE STATE OF OHIO AND IN THE CITY OF COLUMBUS:

BEING LOT NUMBER TWO HUNDRED THREE (203) OF WORTHINGTON GREEN SECTION NO. 3, AS THE SAME IS NUMBERED AND DELINEATED UPON THE RECORDED PLAT THEREOF. OF RECORD IN PLAT BOOK 66, PAGE 98, RECORDERS OFFICE, FRANKLIN COUNTY OHIO.

THIS BEING THE SAME PROPERTY CONVEYED TO MARY MICHELLE CROOKS, DATED 07/16/1993 AND RECORDED ON 07/21/1993 IN INSTRUMENT NO. IN THE FRANKLIN COUNTY RECORDERS OFFICE.

PARCEL ID:

Address: 1576 GRAYLING, COLUMBUS, OH

